

PLACE OF BIRTH

1. County of Gila

District of _____

Town of Globe

or

City of _____

ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS
ORIGINAL CERTIFICATE OF BIRTHState Index No. 143

County Registrar No. _____

Local Registrar No. 171

St. _____

Ward _____

(If birth occurred in a hospital or institution, give its NAME instead of street and number)

If child is not yet named, make supplemental report, as directed.

2. Full name of child Oscar Arroya

3. Sex of Child

To be answered ONLY
in event of plural
births.

4. Twin, triplet or other _____

6. Legitimate? yes7. Date of birth July 2, 1925
Month day year

5. No., in order of birth _____

8. FATHER

Full name Ramon Arroya9. Residence
(Usual place of abode)If nonresident, give place and state Globe, Ariz.

10. Color or race

Mexican11. Age at last birthday 45 (Years)

12. Birthplace (city or place)

(State or country)

Mexico

13. Occupation

Nature of industry Truck Driver

14. MOTHER

Full maiden name Guadalupe Lopez15. Residence
(Usual place of abode)If nonresident, give place and state Globe, Ariz.

16. Color or race

Mexican17. Age at last birthday 38 (Years)

18. Birthplace (city or place)

(State or country)

Mexico

19. Occupation

Nature of industry Housewife

20. Number of children of this mother

(a) Born alive and now living Eight(b) Born alive but now dead none

(c) Stillborn _____

(Taken as of time of birth of child herein
certified and including this child.)21. Were precautions taken against oph-
thalmia neonatorum?yes

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

I hereby certify that I attended the birth of this child, who was born alive at 11 P.m. on the date above stated.
(Born alive or stillborn.)*When there was no attending physician or
midwife, then the father, householder, etc.,
should make this return. A stillborn child
is one that neither breathes nor shows other
evidences of life after birth.

Signature

T. T. Harper, M.D.
(Physician)

Address

Globe, ArizonaGiven name added from
a supplemental report

Filed

7/30, 1925

Local Registrar.

Filed

19____

County Registrar.

Registrar.

611-702-739WRITE PLAINLY WITH UNFADING INK—THIS IS A PERMANENT RECORD
N. B.—In case of more than one child at a birth, a SEPARATE RETURN must be made for each, and the number of each in order of birth stated.